M0800000 4738

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



900159841739

O9 AUG 25 AM 9: 15
SECRETARY OF STATE
SECRETARY OF STATE

RECEIVED

OP AUG 25 PM 4: 19

OWESTER SESSIONERS

B. KOHR

AUG 2 6 2009

EXAMINER



PORATION SERVICE COMPANY ACCOUNT NO. : 12000000195

REFERENCE: 106783 7358775

Ť.,

AUTHORIZATION .

ORDER DATE: August 25, 2009

ORDER TIME : 3:55 PM

ORDER/NO. : 106783-010

CUSTCMER NO: 7358775

CHANGE OF AGENT

NAME: GATEHOUSE TAPESTRY LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Gatehouse	Tapestry LLC	
2. (a) Principal office address of limited liability compar (<i>Note: MUST BE STREET ADDRESS</i>)	ny: <u>1722 Routh Street, Suite</u> Dallas, TX 75201	200
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		16.75 F.
10/27/2008	M08000004738	SEEK F.
3. Date of filing/registration in Florida	4. Document number	92
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept.	of State:
Registered Agent:	C T Corporation System	
Registered Office Address:	1200 South Pine Island Ro Plantation, FL 33324	oad
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	Corporation Service Company	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
		22201
		FL 32301
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.	et address of the registered office case of a Florida limited liability	and the business company, it is
(Signature of a member or authorized representative of a member)		
(Printed or typed name of signee)		
		_
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my positions. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	agree to act in this capacity. I fur proper and complete performance in as registered agent as provided t change in the registered office a ted in writing of this change.	rther agree to of my duties, and l for in Chapter 608 ddress, I hereby

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

as its agent